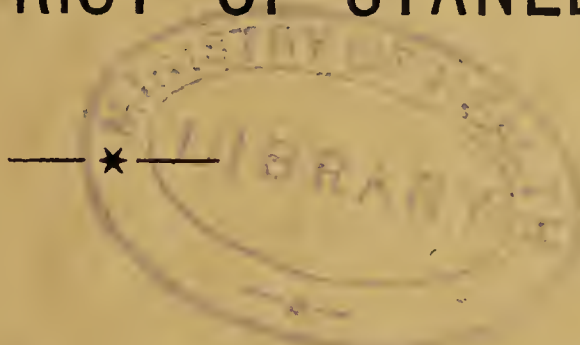


URBAN DISTRICT OF STANLEY



ANNUAL REPORT

of the

Medical Officer of Health

(A. L. TAYLOR, M.D., Ch.B., D.P.H.)

and the

Sanitary Inspector

(D. WALKER, Cert. R.S.I., A.R.S.I., M.S.I.A.)

1953

WAKEFIELD :

W. H. MILNES LTD., 16 WOOD STREET

STANLEY URBAN DISTRICT COUNCIL.

ANNUAL HEALTH REPORT.

STATISTICAL MEMORANDA FOR 1953.

Area in acres	...	...	...	5,169
Registrar General's Estimate of Population for 1953				16,720
Number of Inhabited Houses, 1953, according to Rate Book	...	...	...	5,189
Rateable Value, Year commencing 1.4.53	...			£67,828
Net Product of Penny Rate, Year commencing 1.4.53				£259

VITAL STATISTICS IN 1953.

			M.	F.	Total
Live Births.					
Legitimate	...	...	120	111	231
Illegitimate	...	...	3	2	5
		Total	123	113	236
Still Births.					
Legitimate	...	...	8	—	8
Illegitimate	...	...	—	1	1
		Total	8	1	9

Birth Rate.

Birth Rate (live and still) per 1,000 of the estimated resident population (corrected)	...	14.0
--	-----	------

Deaths.

		M.	F.	Total
All Ages	...	100	87	187
Death Rate per 1,000 of the estimated resident population (corrected)	...			12.4

	M.	F.	Total
Deaths of Infants under 1 year ...	2	3	5
Death Rate of Infants under 1 year :—			
All Infants per 1,000 live births ...			21·2
Legitimate Infants per 1,000 legitimate live births ...			21·6
Illegitimate Infants per 1,000 illegitimate live births ...			0·0
Deaths from Diarrhoea (under 2 years of age)			Nil.
Rate per 1,000 population ...	...		0·0
Rate per 1,000 live births ...	...		0·0
Deaths from Measles (all ages) ...	...		Nil.
Deaths from Whooping Cough (all ages) ...	...		Nil.
Deaths from Cancer (all ages) ...	...		26

Maternal Mortality.

Deaths ...	...	Nil.
Rate per 1,000 (live and still) births ...	...	0·0

RECORD OF DEATHS IN AGE GROUPS, 1953.

<i>Age Group</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Under 1 year ...	2	3	5
1—5 years ...	1	—	1
5—10 „ ...	—	1	1
10—15 „ ...	3	1	4
15—20 „ ...	1	1	2
20—25 „ ...	—	—	—
25—35 „ ...	3	—	3
35—45 „ ...	5	1	6
45—55 „ ...	9	7	16
55—65 „ ...	17	14	31
65—70 „ ...	14	13	27
70—75 „ ...	15	10	25
75—80 „ ...	14	19	33
80—85 „ ...	10	7	17
85—90 „ ...	6	8	14
Over 90 years... ..	—	2	2
Total ...	100	87	187

Principal Vital Statistics for the year 1953.

				Stanley Urban District	Aggregate of Urban Districts	Aggregate of Rural Districts	West Riding Admin County	England and Wales
Population	..	..	..	16,720	1,158,200	434,400	1,592,600	*
Births	{	Males	..	123	9,296	3,730	13,026	*
		Females	..	113	8,499	3,501	12,000	*
		Total	..	236	17,795	7,231	25,026	*
Deaths	{	Males	..	100	7,577	2,222	9,799	*
		Females	..	87	6,885	1,820	8,705	*
		Total	..	187	14,462	4,402	18,504	*
Deaths under one year	{	Males	..	2	295	131	426	*
		Females	..	3	197	110	307	*
		Total	..	5	492	241	733	*
Still Births	{	Males	..	8	261	97	358	*
		Females	..	1	196	79	275	*
		Total	..	9	457	176	633	*
Total Live and Still Births				245	18,252	7,407	25,659	*
					CRUDE	RATES.		
Birth (Live)	..	..	.	14.1	15.4	16.6	15.7	15.5
Death (All causes)	..	..	..	11.2	12.5	9.3	11.6	11.4
Infective and Para. Dis. excl. Tub. but incl. Syph. & other V.D.				—	0.09	0.07	0.08	*
Tuberculosis—Respiratory				0.06	0.17	0.13	0.16	0.18
Tuberculosis—Other				—	0.02	0.02	0.02	0.02
Tuberculosis—All Forms				0.06	0.19	0.15	0.18	0.20
Cancer				1.56	1.99	1.57	1.88	1.99
Vascular lesions of Nervous system				1.44	1.96	1.24	1.76	*
Heart and Circulatory				4.90	4.63	3.27	4.26	*
Respiratory Diseases				0.96	1.39	1.06	1.30	*
Maternal Mortality				—	0.38	0.81	0.51	0.76
Infant Mortality				21.2	27.6	33.3	29.3	26.8
Stillbirth				36.7	25.0	23.8	24.7	22.4

* Figures not available.

All the Maternal Mortality Rates quoted in this Schedule are per 1,000 Live and Still Births.

Stanley Urban District Council.

ANNUAL REPORT

OF THE

Medical Officer of Health, 1953.

*To the Chairman and Members of the
Stanley Urban District Council.*

Mr. Chairman and Gentlemen,

In submitting my Annual Report for the year 1953, I intend to make no significant departure from the general principles followed in my previous Reports. Once again, I intend to include some account of the work carried out in the Health Division of which Stanley Urban District forms part. Although it is not practicable to break down into district sections the figures thus quoted, a simple division by 3 will give you a good idea of the volume of work in the various Services run by the Local Health Authority done in your District during the year.

I hope you will agree that the Report discloses a reasonably satisfactory state of affairs. In my comments on the statistical data relating to your District, I intend to underline the main significant changes which have taken place, and which I am glad to say, in almost all instances, disclose some improvement.

Environmental health has reached a stage at which only slow improvements can now be expected. The worst ravages of epidemic disease and of nutritional defects have, thank goodness, now been overcome. In the important field of maternity and infant welfare, the main gross failures of past years have been eliminated. Thus the tempo of improvement is bound to slow down, and we find ourselves concerned with the more resistant, though numerically less significant defects, disorders and diseases of parturition and early life.

I should like to take this opportunity of thanking the Members of the Council, and in particular the Members of the Health Committee for their unfailing good humour and courtesy to me throughout the year.

I should like also to include in my expression of appreciation, the Clerk of the Council, whose lengthy and detailed knowledge of the District and of the difficulties and factors involved in my work, has proved such a mine of information and advice. To Mr. Walker, the Senior Sanitary Inspector, I should also like to express my thanks for his ready and willing co-operation in all matters.

I remain, Gentlemen,

Yours faithfully,

A. L. TAYLOR,

Medical Officer of Health.

COMMENTS ON STATISTICAL DATA.

The vital statistics for 1953 can be regarded with reasonable satisfaction. The Infantile Mortality Rate at 21.2 per thousand live births is far and away the lowest ever recorded. It is necessary to remember that in dealing with a relatively small number of births, a variation of one or two infantile deaths can cause a big difference in the index per thousand. Nevertheless, it is gratifying to find this significant improvement, and one must hope that no effort will be spared by all concerned to maintain this. The Death Rate compares not unfavourably with other similar areas and the causes of death are mainly attributed to the degenerative conditions associated with old age.

Once more, no maternal death was recorded. This is not accidental, but a very positive result of the skill and attention paid to expectant mothers by family doctors, Hospitals and Anti-Natal Clinics.

The Tuberculosis figures continue to give some encouragement. Improvement is slow but there are certain factors which give one reason to hope for steady progress in this important field. I will discuss this more fully later in the Report.

Causes of Death in the Stanley Urban District, 1953.

CAUSE OF DEATH				MALES.	FEMALES.
All Causes				100	87
1. Tuberculosis, respiratory	..	..	..	1	..
2. Tuberculosis, other	..	..	..	..	..
3. Syphilitic disease	..	..	..	..	..
4. Diphtheria	..	..	..	..	..
5. Whooping Cough	..	..	..	..	..
6. Meningococcal infections	..	..	..	..	..
7. Acute Poliomyelitis	..	..	..	..	..
8. Measles	..	..	..	..	..
9. Other infective and parasitic diseases	..	..	..	..	..
10. Malignant neoplasm, stomach	..	..	..	7	1
11. Malignant neoplasm, lung, bronchus	..	..	..	4	..
12. Malignant neoplasm, breast	..	..	..	..	3
13. Malignant neoplasm, uterus	..	..	..	..	..
14. Other malignant and lymphatic neoplasms	..	..	..	5	6
15. Leukaemia, aleukaemia	..	..	..	..	..
16. Diabetes	..	..	..	1	3
17. Vascular lesions of nervous system	..	..	..	8	16
18. Coronary disease, angina	..	..	..	21	14
19. Hypertension with heart disease	..	..	..	2	..
20. Other heart disease	..	..	..	18	23
21. Other circulatory disease	..	..	..	3	1
22. Influenza	..	..	..	..	..
23. Pneumonia	..	..	..	2	3
24. Bronchitis	..	..	..	7	4
25. Other diseases of the respiratory system	..	..	..	..	..
26. Ulcer of stomach and duodenum	..	..	..	..	1
27. Gastritis, enteritis and diarrhoea	..	..	..	..	..
28. Nephritis and nephrosis	..	..	..	1	..
29. Hyperplasia of prostate	..	..	..	3	..
30. Pregnancy, childbirth, abortion	..	..	..	..	..
31. Congenital malformations	..	..	..	1	2
32. Other defined and ill-defined diseases	..	..	..	4	7
33. Motor vehicle accidents	..	..	..	3	2
34. All other accidents	..	..	..	6	1
35. Suicide	..	..	..	3	..
36. Homicide and operations of war	..	..	..	..	..
Live Births.	Total	..	..	123	113
	Legitimate	..	..	120	111
	Illegitimate	..	..	3	2
Still-Births.	Total	..	..	8	1
	Legitimate	..	..	8	..
	Illegitimate	..	..	..	1
Deaths of Infants under 1 year of age.	Total	..	..	2	3
	Legitimate	..	..	2	3
	Illegitimate	..	..	..	..
Population				16,720	
Comparability Factors :--					
Births				0.99	
Deaths				1.11	

INFANTILE MORTALITY IN 1953.

Net Deaths from Stated Causes under One year of Age.

CAUSES OF DEATH.	Under 1 Week.	1—2 Weeks.	2—3 Weeks.	3—4 Weeks.	Total under 1 Month.	1—3 Months.	3—6 Months.	6—9 Months.	9—12 Months.	Total under 1 Year.
Cyanosis. Congenital heart disease. }	1	-	-	-	1	-	-	-	-	1
Broncho-pneumonia. ..	1	-	-	-	0	-	-	1	-	1
Pneumococcal Meningitis	-	-	-	-	0	1	-	-	-	1
Broncho-pneumonia. Microcephalia. }	-	-	-	-	0	1	-	-	-	1
Hydrocephalus. Spina bifida. }	-	-	-	-	0	1	-	-	-	1
Total ..	1	-	-	-	1	3	-	1	-	5

INFANT DEATHS PER THOUSAND LIVE BIRTHS.

1918—1923	1924—1933	1934—1943	1944—1953
	1924 89·0	1934 85·0	1944 50·2
	1925 103·0	1935 30·1	1945 45·0
	1926 98·3	1936 34·7	1946 31·7
	1927 67·3	1937 29·4	1947 53·1
1918 133·2	1928 81·1	1938 69·5	1948 32·3
1919 104·3	1929 62·3	1939 42·9	1949 25·3
1920 100·5	1930 65·8	1940 72·3	1950 53·0
1921 98·0	1931 60·2	1941 37·8	1951 39·1
1922 98·0	1932 84·5	1942 47·6	1952 33·3
1923 87·3	1933 56·1	1943 54·2	1953 21·2
Average 103·6	Average 76·8	Average 50·4	Average 38·4

Details of STILL-BIRTHS for the past five years.

Year	No. of Live Births	No. of Still-Births	Proportion of Stillbirths per 100 Live Births
1949	277	4	1·4
1950	283	4	1·4
1951	230	5	2·2
1952	210	6	3·3
1953	236	9	3·8

Details of NEO-NATAL DEATHS for the past five years.

Year	No. of Live Births	No. of Neo-Natal Deaths	Proportion of Neo-Natal deaths per 100 Live Births
1949	277	2	0·72
1950	283	9	3·2
1951	230	5	2·2
1952	210	7	3·3
1953	236	1	0·4

GENERAL PROVISIONS OF HEALTH SERVICES IN THE AREA.

Public Health Officers :

Medical Officer of Health (part time):—Dr. A. L. Taylor,
M.D., D.P.H.

Chief Sanitary Inspector :—D. Walker, Cert. R.S.I., A.R.S.I.,
M.S.I.A., Certified Inspector of Meat and other Foods.

Additional Sanitary Inspector :—R. Thorp, Cert. R.S.I.,
A.R.S.I., M.S.I.A.

Clerks :—Mrs. M. Wood.
Mr. J. G. Bower.

The Medical Officer is also appointed to two adjacent County Districts and acts as Divisional Medical Officer for the Local Health Authority in respect of those services administered by the latter.

The West Riding County Council, who are the Local Health Authority, are responsible for the administration of the Part III health services in the area. Division 16, in which Stanley Urban District is included, has a population of approximately 53,000, divided between three Urban Districts. The Medical Officer of Health of Stanley is also Divisional Medical Officer and School Medical Officer for the West Riding County Council and is responsible for the day to day administration of all the County Services throughout the Division. Further experience of the Divisional Scheme, as administered in the West Riding, has strengthened my belief in its essential soundness. All local contacts are close and there is very ready interchange of information between the Divisional Medical Officer and his colleagues on Local Authorities, in the Education Service, in general practice, Hospitals and all the closely associated services. The compact size of the Division makes it possible to care for the public health needs of the community in a manner which would be impossible were the unit appreciably larger. To my knowledge, no trouble has been experienced during

the year and I have no indication that any difficulty has been found in bringing to the notice of the Divisional Medical Officer any matters requiring his advice or attention.

Once again, I should like to express my belief that any further delegation to Divisional bodies must, to effect improvement, be accompanied by financial autonomy and by powers of appointing and dismissing staffs locally.

This Report will include an account, mainly statistical, of the work carried out in the health Division in public health services administered by the West Riding County Council. I hope that the information given will prove of interest, and you can rest assured that it gives a faithful picture of the conditions prevailing in the various Local Health Authority services. These are running satisfactorily and no major criticism is possible. The only limitations are those imposed by National conditions and are completely outside the control of Local Government.

REPORT ON THE DIVISIONAL MEDICAL
SERVICES ADMINISTERED IN THE URBAN
DISTRICT BY THE LOCAL HEALTH
AUTHORITY.

No major changes have occurred during the year. The Divisional Health Office continues to function satisfactorily and the only change in the administrative Staff was caused by the resignation of the Senior Clerk who took up another appointment. He has been replaced by a colleague and the staff recruited by the addition of a new junior.

The Central Clinic, situated in Rothwell, continues to serve most satisfactorily as a multi-clinic. The Division is indeed fortunate in its possession of these premises.

The professional staff of the Division consists of the Divisional Medical Officer, and two Assistant County Medical Officers whose duties are mainly clinical. One Health Visitor resigned on taking up an appointment abroad. There were also the resignations of one Midwife and of one Home Nurse. Other workers include a part-time Speech Therapist, a part-time Mental Health Social Worker, and a part-time Orthopaedic Nurse. The Consultant Paediatrician is in attendance each month and an Aural Surgeon is available when his services are needed. The Ophthalmologist pays regular visits and her work is now completely up to-date. The Dental Clinic in Rothwell is in full activity and much good work has been done during the year.

School Medical Service.—The school population of the Division is approximately 7,000. The service is staffed clinically by the two Assistant County Medical Officers and by Health Visitors who act in the capacity of school nurses. The report which will follow will give some indication of the very considerable volume of work carried out during the year. May I remind you that a little mental arithmetic will be necessary to give the approximate figures for your own area. The conditions prevailing throughout the Division, both socially and industrially, are virtually identical and one is quite justified in assuming reasonable uniformity.

I am glad to be able to report that the general health of the child population has been maintained at a high level. Nutritionally, one can make practically no criticism. It is now many years since I saw a case of clinical rickets. Children are sturdy, well-nourished, clear of skin and bright of eye. There is, I am glad to say, now virtually no delay in carrying out any necessary ear, nose or throat operations. Beds are readily available at Seacroft or at Clayton Hospital. This is a great improvement on the state of affairs a year or two ago.

The work of the School Medical Service has been greatly facilitated by the excellent relationship existing between ourselves and the Headmasters and Headmistresses of schools, and the cordial manner in which the Divisional Education Officer responds to any approach. I should like to take this opportunity of expressing my appreciation of the many courtesies which have been experienced during the year.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS DURING 1953.

A. Periodic Medical Inspections.

Number of Inspections in the prescribed Groups:—

Entrants	...	..	...	1,078
Second Age Group	...	...	...	928
Third Age Group	...	...	...	511
				<hr/>
				2,517
				<hr/>

B. Other Inspections.

Number of Special Inspections	...	106
Number of re-inspections	...	356
		<hr/>
		462
		<hr/>

C. Pupils found to require Treatment.

Group.	For Defective Vision (excluding squint).	For any of the other conditions recorded.	Total individual pupils
Entrants	43	210	253
Second age group ...	85	162	247
Third age group ...	45	88	132
<hr/>			
Total ...	173	460	632

**LIST OF DEFECTS
FOUND BY MEDICAL INSPECTION IN THE YEAR
ENDED 31st DECEMBER, 1953.**

Defect or Disease.	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
	No. of Defects		No. of Defects	
	Requir- ing treat- ment.	Requiring to be kept under observation but not requiring treatment	Requir- ing treat- ment.	Requiring to be kept under observation but not requiring treatment.
Skin	65	100	4	2
Eyes—				
a. Vision ...	173	60	13	3
b. Squint ...	32	16	2	1
c. Other ...	16	13	—	—
Ears—				
a. Hearing ...	8	5	1	—
b. Otitis Media ...	45	4	1	—
c. Other ...	9	4	—	—
Nose or Throat ...	63	124	7	4
Speech	5	16	—	1
Cervical Glands ...	11	87	—	1
Heart and Circulation ...	20	55	1	3
Lungs	38	45	2	1
Developmental—				
a. Hernia ...	1	—	—	—
b. Other ...	4	6	—	—
Orthopaedic—				
a. Posture ...	21	25	—	—
b. Flat foot ...	16	35	—	—
c. Other ...	16	55	—	2
Nervous System—				
a. Epilepsy ...	3	2	—	1
b. Other ...	2	18	2	—
Psychological—				
a. Development ...	9	4	—	—
b. Stability ...	30	8	3	—
Other	46	26	9	1

CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR, IN AGE GROUPS.

Age Groups	Number of pupils inspected	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of Col. 2	No.	% of Col. 2	No.	% of Col. 2
Entrants	1,078	472	43·8	601	55·7	5	0·5
Second Age Group ...	928	394	42·5	529	67·0	5	0·5
Third Age Group ...	511	242	47·3	269	52·7	—	—
Total ...	2,517	1108	44·0	1399	55·6	10	0·4

INFESTATION WITH VERMIN.

Total number of examinations in the schools by the school nurses or other authorised persons ...	15,948
Total number of <i>individual</i> pupils found to be infested	1,001
Number of individual pupils in respect of whom cleansing notices were issued. (Section 54 (2), Education Act, 1944)	13
Number of individual pupils in respect of whom cleansing orders were issued. Section 54 (3), Education Act, 1944)	1

DISEASES OF THE SKIN (excluding uncleanness).

	Number of cases treated or under treatment during the year	
	By the Authority	Otherwise
Ringworm— (i) Scalp ...	—	—
(ii) Body ...	—	—
Scabies	1	—
Impetigo	12	—
Other skin diseases ...	16	—
Total ...	29	—

EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases dealt with	
	by the Authority	Otherwise
External and other, excluding errors of refraction and squint	—	—
Errors of Refraction (including squint) ...	—	446
Total ...	—	446
Number of pupils for whom spectacles were—		
(a) prescribed ...	156	—
(b) obtained ...	148	—

DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of cases treated	
	by the Authority	Otherwise
Received operative treatment		
(a) for diseases of the ear ...	—	4
(b) for adenoids and chronic tonsillitis ...	—	93
(c) for other nose and throat conditions ...	—	8
Received other forms of treatment ...	—	2
Total ...	—	107

ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in Hospitals ...	10	
(b) Number treated otherwise— e.g. in clinics or out-patient departments ...	by the Authority	Otherwise
	39	—

CHILD GUIDANCE TREATMENT.

	Number of cases treated	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of pupils treated at Child Guidance Clinics ...	14	—

SPEECH THERAPY.

	Number of cases treated	
	by the Authority	Otherwise
Number of Pupils treated by Speech Therapists ...	46	—

OTHER TREATMENT GIVEN.

	Number of cases treated	
	by the Authority	Otherwise
(a) Miscellaneous minor ailments ...	137	—
(b) Other :—		
1. Ultra Violet Light ...	127	—
2. Paediatric ...	—	28
3. Surgical ...	—	39
4. Dermatology ...	—	4
Total ...	264	71

CONSULTANT E.N.T. SERVICE.

Consultant Clinic.

Number of sessions held during the year ... 1

	Pre-School children	School children
No. of individual children seen by Consultant including those continuing attendance from previous year ...	2	15
No. of above referred for operative treatment ...	2	8
No. of children—		
(a) who obtained operative treatment during the year ...	2	7
(b) treated at school clinics ...	—	—
Total number of attendances at consultant clinic ...	2	15

CONSULTANT ORTHOPAEDIC SERVICE.

A. Consultant Clinic.

No. of Sessions held during the year	...	...	11
	Pre-school children	School children	
No. of individual patients seen by Consultant, including those continuing attendance from previous year	6	13	
No. of above :—			
(a) referred for operative treatment as short-stay cases only	—	—	
(b) recommended long-stay hospital school	—	—	
(c) recommended treatment by orthopaedic nurse or physiotherapist :—			
(i) at treatment centres	—	2	
(ii) domiciliary	—	2	
No. of children who obtained operative treatment during the year	—	—	
Total number of attendances at the Consultant clinic	6	15	

B. Treatment Centres.

No. of Sessions held during the year	...	...	46
	Pre-school children	School children	
Total number of patients treated (including cases continuing treatment from previous year)	7	39	
Total number of attendances	40	266	

C. Domiciliary Treatment.

	Pre-school children	School children
Total number treated	—	21
Total number of visits to patients' homes	—	38

D. Appliances.

	Pre-school children	School children
Number of appliances :—		
(a) recommended	—	—
(b) obtained	—	—

PAEDIATRIC SERVICE.**Consultant Clinics.**

Number of sessions held during year 12

	Pre-school children	School children
Number of individual patients seen ...	13	30
Total number of attendances at clinics ...	28	53

SPEECH THERAPY.

Clinic.

Total number of sessions held during year ... 118

	Stammers	Speech Defects
No. of new cases treated during year ...	4	21
No. of cases already attending for treatment from previous year ...	12	9
Total number of cases treated ...	16	30
No. of cases discharged during year :—		
(a) Speech normal ...	6	9
(b) Unsuitable for treatment ...	—	3
(c) Left school ...	2	—
(d) By reason of non-attendance ...	—	—
(e) Other reasons ...	1	1
No. of cases awaiting treatment at end of year ...	—	—
No. of visits made to schools ...	14	14
No. of home visits ...	2	47

DIPHTHERIA IMMUNISATION.

Immunisation carried out during the year (being a summary of the half-yearly returns required by the Ministry of Health).

	Age at final injection							Total
	Under 1	1	2	3	4	5 to 9	10 to 14	
No. of children who completed a full course of primary immunisation (including temporary residents) ...	331	128	16	11	9	148	28	671
Total number of children who were given a secondary or re-inforcing injection (i.e. subsequent to complete full course) ...	—	—	—	—	6	526	161	693

Immunisation in relation to Child Population.

Number of children at 31st December, 1953, who had completed a course of immunisation *at any time* since 1st January, 1939.

Age at 31.12.53 i.e. Born in Year	Under 1 1953	1—4 1952—1949	5—9 1948—1944	10—14 1943—1939	under 15 Total
Last complete course of injections (whether primary or booster)					
A. 1949—1953 ...	48	1,945	2,573	2,172	6,738
B. 1948 or earlier	—	—	1,525	930	2,455

WHOOPING COUGH IMMUNISATION.

A. Immunisation carried out during the year.

Age at Final injection	Number of children who completed full course of immunisation
Under 6 months	10
6 months to one year	256
1—2 years	114
2—3 years	26
3—4 years	26
Total ...	432

B. Immunisation in relation to Child Population.

Number of children at 31st December, 1953, who had completed a course of immunisation at any time before that date :—

Age at 31.12.53 i.e. Born in Year	Under 1 1953	1 1952	2 1951	3 1950	4 1949	5 1948	Total
Number immunised ...	55	304	111	52	25	7	554

MEDICAL EXAMINATION OF ENTRANTS TO TRAINING COLLEGES.

No. of examinations carried out during the year ... 33

DOMICILIARY NURSING SERVICES

Health Visiting.—Following recent trends, there has been a still further widening of the scope of the Health Visitors' work. This is an exacting branch of the Nursing service. The Health Visitor is able to advise on many problems and her work is becoming increasingly recognised. The whole range of Tuberculosis visiting is now carried out by Health Visitors with the exception of a very small part of the Divisional area. School nursing is another branch of the work undertaken by Health Visitors and her knowledge of the family and background of children is of enormous help to all concerned. Efforts are being made to increase co-operation between the family doctor and the Health Visitor. Often this is a matter of personal relationship, but one can envisage a much closer working relationship when measures now under consideration are put into effect.

This should result in an all round gain and should benefit very greatly families needing special care and attention.

Home Nursing.—The trend here is of increased work, largely, of course, due to the ageing population and the increasing number of infirm and chronic sick patients who must stay at home. During the year, the Relief Home Nurse resigned, but we have been fortunate in securing the services of two first class nurses who will undertake holiday and routine relief work throughout the Division. I am particularly glad to be able to record this as there was a danger that some members of the Home Nursing staff would become rather badly overloaded. This can now be avoided. The scope of the Home Nurse's duty tends to increase and I am glad to record that a very close relationship between them and the family doctor is existing and strengthening.

Midwifery Service.—For some years now, approximately 50 per cent. of all births have taken place in Maternity Homes or Hospitals. There is no sign of change and no diminution in the demand for Institutional accommodation. Thus, the case load for the Midwives in this Division has tended to remain at a low level. During the year one Midwife resigned and one went absent from duty. In spite of this, the work was adequately maintained and I think it possible that we shall find our present working number of six Midwives and one Relief to be quite adequate to cover the amount of domiciliary midwifery nursing. Relationships with Hospitals and with family doctors were extremely good throughout the year and no friction whatever occurred.

Home Help Service.—This very important branch of the public health service increased considerably during the year. Indeed towards the end of the year it was necessary to make a re-assessment of many cases because the number of hours permitted was being exceeded throughout the Division. It is necessary to remember that when dealing with aged, infirm, or chronic sick recipients of Home Help, periods of months, or even years, must be envisaged. Needs tend to increase in individual cases and it is impossible to withdraw help without causing very considerable hardship. Very careful pruning has been necessary and a glance at the table showing the number of cases receiving help will indicate the complexity of the problem. The vast bulk of cases are those of elderly or infirm persons. It is far better that they should be maintained in reasonable comfort in their own homes, than they should be allowed to fall into neglect and ultimately be driven to seek institutional accommodation. I am glad to record that the cases of abuse which at first occurred with distressing regularity, are now diminishing markedly and it is rare to find that there has been any misuse of the Service.

DOMESTIC HELPS.

Authorised Divisional Establishment—

(i)	Basic	...	...	...	23
(ii)	From Reserve Pool	...	...	...	—
					—
(iii)	Total	...	...	...	23
					—

Number of Domestic Helps employed at 31st December, 1953—

(i)	Whole-time	...	...	...	—
(ii)	Part-time	...	...	...	47
					—
(iii)	Total	...	...	...	47
					—

Cases provided with Domestic Help during year ended 31st December, 1953—

				No. of Cases	Hours employed
(i)	Maternity (including expectant mothers)	...	...	43	3,193
(ii)	Tuberculosis	...	...	3	400
(iii)	Chronic sick, including aged and infirm	...	...	181	47,182 $\frac{3}{4}$
(iv)	Others	...	...	23	1,413 $\frac{1}{2}$
Total				250	52,189 $\frac{1}{4}$

Employment :—

Total No. of hours of all home helps employed between 1st Jan. and 31st Dec., 1953 \div 2288 (52 weeks \times 44 hours). = No. of home helps that could have been employed full time. = 22·8 Home Helps.

VACCINATION AND IMMUNISATION.

One can record with sober satisfaction that immunisation against Diphtheria has been maintained at a reasonably satisfactory level. There was, at one time, an indication of a certain amount of parental apathy, but this has been overcome to a great extent and parents are having children protected as a routine, either in the clinics or by their own medical practitioners. This is a very satisfactory state of affairs and the continued absence of any case of Diphtheria is a very happy reward for the efforts of all concerned. Reinforcing injections have been given to a very considerable number of school-children and this service will be continued each year. No special publicity campaign was undertaken, and I still pin my faith on the day to day efforts of Health Visitors in securing the co-operation of parents.

Vaccination against Smallpox showed a welcome improvement on 1952. This may have been due partly to the outbreak of Smallpox in another part of the Riding. The modern technique is so satisfactory and so completely devoid of risk or complication that there is really no reason for parents to withhold their consent. The great value of infant vaccination is the fact that should the child be exposed to risk in adult life, he or she can be re-vaccinated with no trouble and with absolutely no risk or disability. I hope that the present improvement in acceptance will be maintained and extended.

VACCINATION AGAINST SMALLPOX.

Number of Persons Vaccinated or re-vaccinated
during the Year.

Age at Date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number Vaccinated ...	333	60	174	1096	943	2606
Number Re-Vaccinated ...	—	—	1	354	1047	1402

Whooping Cough Immunisation is now universally accepted as a routine procedure. In agreement with the Ministry, no special publicity has been given. Whooping

Cough protection has been given to the children of all mothers requesting it and the fact that during the year no fewer than 432 children were immunised is sufficient indication of the enthusiasm shown by the parents for this very important measure. It is yet too early to evaluate satisfactorily the results of immunisation. All observers, however, agree that a very considerable measure of protection is afforded and that immunisation against Whooping Cough should be offered to all young children.

During 1954, it is hoped to offer protection against Tuberculosis to children in the 13—14 year old age group. This protection will take the form of B.C.G. Vaccination, a measure which has been in use for a considerable number of years in some Continental countries. Vaccination will, of course, be entirely voluntary, and will only be carried out after very careful preliminary tests to determine its necessity. It is hoped that the protection thus afforded will diminish very markedly the incidence of those tragic cases of overwhelming tuberculous infection which occur all too frequently in adolescents or young adults. In my Report next year I hope to give you a much fuller account of this procedure.

CLINIC PROVISION IN THE STANLEY URBAN DISTRICT.

No major changes occurred during the year. Child Welfare Clinics are held weekly at Wrenthorpe and Outwood, and twice weekly at Stanley where it has been found desirable to provide an additional half-day clinic primarily for the benefit of toddlers. Both are well attended.

Ante-Natal Clinics are held weekly at Wrenthorpe, Outwood and Stanley. In all three cases attendances have continued low, a trend which is being experienced universally. The reasons for this are partly that at least half of the births now take place in Maternity Homes or Hospitals and that women are going to the Ante-Natal Clinics at these institutions. In addition, many domiciliary cases are booking the family doctor who himself gives the necessary ante-natal care. Thus the diminution in clinic attendance does not mark any falling away of standards of ante-natal care. Whilst one may experience a certain amount of regret that the facilities offered by the Local Health Authority clinics are not utilised more, one must, in all honesty, express the view that the thing that really matters is that mothers should not be

deprived of the necessary ante-natal care, from whatever source. One feels that no mother is failing to obtain the necessary help and advice so essential during pregnancy and such an important factor when the patient goes into labour.

Relaxation Classes are held at Outwood and are gaining in popularity.

Ultra Violet Light Clinics are held three times weekly at Rothwell and some children from the Stanley area find it convenient to attend. In other cases, children are referred to the Clayton Hospital, Wakefield, where Ultra Violet Light is given.

Consultant Clinics.—These are held at the Central Clinic, Rothwell, and there have been no changes since last year.

Ophthalmic Clinics are held two or three times monthly, according to need. The work is absolutely up to date, and there is now no delay in the provision of glasses.

Dr. J. D. Pickup holds a Paediatric Consultant Clinic once a month. His services are very much appreciated and he is increasingly consulted by general practitioners in the area. Cases under his care are, if necessary, admitted to beds in Wakefield for observation or treatment.

Ear, Nose and Throat work is now completely up to date and again there is now very little waiting. So easy is it for children to be seen in Hospitals that it has not been necessary to hold frequent Ear, Nose and Throat clinic sessions at Rothwell. At the same time, Mr. Lord, Consultant Aural Surgeon, is available and attends if necessary. Cases from Stanley area are also seen by Mr. Hutton, Consultant Aural Surgeon, at Clayton Hospital, Wakefield.

An Orthopaedic Clinic was held weekly during the year and remedial exercises were carried out under the supervision of a specially trained Orthopaedic Nurse. The very few cases needing surgical intervention or advice were referred to the Orthopaedic Surgeon at Pinderfields Hospital.

A Speech Therapy Clinic is held on one whole day and one half day each week. It is reasonably well attended, though some dislocation is caused by broken appointments.

Dr. MacTaggart sees mal-adjusted children at the Child Guidance Clinic at Wakefield and her reports are helpful and up to date.

A review of Clinic provision in your district leads one to the conclusion that the services are reasonably adequate and that there is no justification for the construction of new special premises. The existing Central Clinic at Rothwell is adequate for all present needs.

AMBULANCE SERVICE.

This important and much used service has now settled down to a mature and steady level of efficiency. I am glad to reiterate my tribute to the kindness and co-operation extended by the Chief Ambulance Officer and his Divisional Officers. It is pleasant to be able to make personal contact should any difficulty or complication arise, and to know that one's views will be given a sympathetic hearing and one's difficulties considered and met wherever possible. No serious complaint has arisen and there is some evidence of a diminution of abuse of the service.

LABORATORY FACILITIES.

The laboratory at Wakefield, under the administrative control of Dr. Findlay, has rendered yeoman service throughout the year. Here again, one feels very strongly the advantage of being able to make personal contact and undertake discussions on cases requiring bacteriological investigation. The service is most efficiently run and everyone concerned is extremely helpful.

MILK SAMPLES.

Under the Food and Drugs Act, milk samples are submitted to the County Analyst at Halifax, as are also samples of water and foodstuffs.

HOSPITAL PROVISION.

There has been very little change during the year in the Hospital situation. No difficulty is experienced except in obtaining the admission of chronic sick cases. Here, I may say at once, that the difficulty is not the fault of any individual, or of the Hospital Service. The pressure on chronic sick beds is very great and I should like, once more, to pay tribute to the valuable work being done by Dr. Rosenthal, Geriatric Consultant. This work, more than any other, has been responsible for the slight amelioration which has taken place. Dr. Rosenthal's work of rehabilitating a considerable proportion of his elderly chronic sick cases has

resulted in many cases being able to return to their homes and families. In spite of this, one cannot be complacent. The ageing of the population makes an increase in the incidence of chronic sickness inevitable and additional accommodation is urgently required. Co-operation with general practitioners in the area has continued on the friendliest basis. They are greatly to be thanked for their restraint in seeking accommodation for this class of patient, and no instance has occurred during the year of any undue pressure in trying to obtain the admission of a patient who could be nursed satisfactorily at home.

Infectious Disease provision is entirely adequate. The low incidence of Infectious Disease has meant that far fewer cases need admission. These, usually, are admitted to Snapethorpe Hospital, whilst some cases are admitted to Seacroft. The standard of care and attention in these two modern and well staffed Hospitals is of the highest. I should like to take this opportunity of expressing my appreciation of the full and prompt reports regarding diagnosis and treatment which are meticulously sent to the family doctor and the Local Health Authority alike. No improvement in this field is needed so far as your district is concerned.

General Hospitals.—Acute medical and surgical cases are admitted to Leeds or Wakefield Hospitals without delay or difficulty. Our geographical situation in this respect is a very fortunate one, and provision is adequate.

Maternity Home accommodation is available for all mothers needing such provision on social grounds. Cases presenting no obstetrical abnormality are admitted to Wakefield General Hospital, Manygates Maternity Hospital or Walton Hall Maternity Home. Abnormal cases are admitted mainly to Wakefield General Hospital or to Manygates, but accommodation is available at Leeds Maternity Hospital, and a number of cases have been admitted to the latter during the year. Approximately 50 per cent. of all births now take place in Maternity Homes or Hospitals. Here again I should like to acknowledge the co-operation which exists between the Maternity Hospital Service and the Local Authority. There is a free exchange of information and relationships have been of the happiest.

The over-all picture is of generally adequate hospital provision in the area. An increase in the number of beds for chronic sick is very desirable and I know that consideration is being given to this part of the Hospital Service.

PREVALENCE AND CONTROL OF INFECTIOUS DISEASE.

Following the pattern of recent years, the incidence of Infectious Disease has been slight.

Diphtheria.—No case occurred during the year.

Scarlet Fever.—Only 17 notifications were received, of which 5 were admitted to Hospital at the request of the family doctor. Scarlet Fever continues very mild in type. Indeed, so mild has it become that it is increasingly difficult to enforce adequate isolation or nursing of patients. In this lies a certain amount of danger. Although the clinical severity is, at the moment, slight, there is in every case a risk of more serious complications of which acute rheumatism is one, and one feels that some cases would benefit by a more strict régime of nursing. At the same time, it is only fair to say that no instance has come to light where permanent damage has occurred. The present mildness of Scarlet Fever is a phenomenon which has been noted in the past. One must be on guard against a return of the more serious type of Scarlet Fever and one must deplore to some extent a tendency to laxity in the treatment and notification of the disease.

Poliomyelitis (Infantile Paralysis).—Two cases occurred during the year. Both were admitted to Hospital and neither case proved fatal.

Puerperal Pyrexia.—Only one notification was received and the illness was of mild type.

Whooping Cough.—Only 31 notifications were received during the year, and one case was admitted to Hospital. During 1953, supplies of vaccinating material were available, but it is yet too early to give an accurate account of the results of vaccination against the disease. I expect a period of two or three years to elapse before the full value of widespread vaccination becomes apparent. Meanwhile, Whooping Cough remains a distressing disease liable to serious complications and actually menacing life in young infants. Serious cases, if necessary, are admitted to Hospital. No death was attributed to the disease during 1953.

Measles.—There was a moderate prevalence of this disease but no serious complications arose and there was no fatal case. Protection against this disease is still awaited.

Pneumonia.—10 cases were notified and this again is a considerable reduction on last year. The incidence of pneumonia is increasingly falling on the elderly. The newer anti-biotic drugs are proving valuable in controlling the severity of the disease. Pneumonia was responsible for five deaths.

Food Poisoning.—10 cases were notified of which one was admitted to Hospital. Almost all were associated with an outbreak occurring in a neighbouring County Borough. The food responsible had been purchased outside your area and no special measure was necessary to control the disease which occurred in scattered isolated cases throughout the district. The standard of hygiene observed throughout school canteens continues high. Opportunity was taken to give talks to food handlers and a visit was paid to the Farm Stores, where the hygiene of food preparation was stressed, and the dangers likely to arise were outlined to an intensely interested group of workers.

Dysentery.—Five cases of mild Dysentery occurred and one was admitted to Hospital. This type of dysentery is endemic in the population and occasional cases are felt to be inevitable.

Tuberculosis.—There is reason for some optimism in this field of Infectious Disease. In 1953, no notification of non-pulmonary tuberculosis was received. This, in my opinion, is entirely due to the almost universal use of tuberculin tested or pasteurized milk. Untreated milk was the commonest vehicle by which non-pulmonary tuberculosis was spread, and the elimination of this disease from the child population is, in my opinion, a remarkable tribute to the value of the great care now being bestowed in the control of milk production and supplies.

The number of new cases of pulmonary tubercle notified, whilst low in relation to every previous year except in 1952, is still higher than one would like. At the same time, there is reason to believe that cases are now coming to light at an earlier stage than formerly, largely due to the increased awareness of risk on the part of all concerned, and partly due to the wide use of mass radiography. The outlook for any individual case has improved very considerably as a result of recent advances both in medical and surgical treatment. The Chest Physicians both at Chest Clinics and in Sanatoria are

doing extremely valuable work and one is bound to feel optimistic as to the ultimate outcome from a community point of view.

During 1954, B.C.G. vaccination will be introduced to the community on a mass scale. It is intended to offer this protection to a selected age group of children. If parental consent is given, preliminary skin tests will be carried out and vaccination performed on children whose reactions justify this measure. There is absolutely no risk to the child, the procedure is painless and complications are practically unknown. Whilst it is not claimed that B.C.G. will eliminate tuberculosis from the community, it is felt, and there is a considerable volume of evidence available from certain Continental countries, that vaccination of selected groups of children will do much to eliminate the overwhelming and sudden type of pulmonary tubercle which is instrumental in causing so many deaths in the adolescent and young adult age groups.

Tuberculosis represents a real and urgent challenge to preventive medicine. There is urgent need to take every practicable step in its prevention and control. I am glad to record my appreciation of the sympathy and consideration given by your Housing Committee to requests for priority re-housing in certain cases of pulmonary tubercle requiring improved accommodation. For my part, I have endeavoured to exercise restraint in view of the over-all housing shortage. Only infectious cases needing separate bedroom accommodation have been put forward for priority consideration. The Chest Physicians are extremely appreciative of the understanding attitude displayed by your Council. I should like to add my own word of thanks.

Venereal Diseases.—Venereal Diseases have been, so far as one can tell, almost completely absent. In fact, the Venereologists are rapidly putting themselves out of work. This is a certain sign of successful activity and represents the highest form of preventive medicine. No new case came to light during the year.

Enteric Fever.—No case occurred during 1953.

Infestations.—No adult case was notified during the year.

Pediculosis in school children was confined to a small but well-known group of families. Some particularly persistent offenders were subjected to pressure to ensure that their children's heads were kept clean. I am glad to report that success in ensuring freedom from infestation was recorded in every case. Re-infestation, however, must be anticipated in certain families and very great vigilance is necessary in school to keep this nuisance under control. With the insecticides now available there is absolutely no excuse for verminous heads. In the interests of the child population, I am determined to take every possible means to eradicate infestation. May I add that the vast majority of children are clean in person and clothing and are well cared for.

Scabies.—No notification was received. I have no knowledge of any incidence of this condition in your District during the year.

Cases of Notified Infectious Diseases in Age Groups (excluding Tuberculosis)

Disease.	Under 1 year		1-3 years		3-5 years		5-10 years		10-15 years		15-25 years		25-45 years		45-65 years		over 65 years		Totals	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Smallpox ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Scarlet Fever ..	..	..	1	..	3	2	3	7	1	..	..	..	..	..	..	..	..	..	8	9
Diphtheria ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever (including Paratyphoid)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pneumonia ..	1	..	..	..	..	..	3	..	..	..	..	..	2	..	1	2	..	1	7	3
Puerperal Pyrexia ..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1
Acute Anterior Poliomyelitis	..	..	..	1	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	2
Acute Anterior Encephalitis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Meningococcal infection	..	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	2	..
Ophthalmia Neonatorum	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	1	1
Whooping Cough ..	1	1	2	4	4	5	6	6	2	..	..	..	..	..	..	..	..	..	15	16
Measles ..	3	..	25	23	27	22	36	37	1	1	1	..	1	..	..	..	..	94	83	..
Sonné Dysentery	..	..	1	..	1	..	1	..	..	..	..	..	1	..	..	..	..	4	..	..
Food Poisoning ..	..	..	..	1	..	..	2	..	..	..	1	..	2	..	1	1	1	6	3	..
Totals ..	5	1	30	29	35	29	51	50	4	1	2	2	6	1	3	4	1	1	137	118

Cases of Notified Infectious Diseases (excluding
Tuberculosis) and Cases removed to Hospital.

Disease	No. Notified	No. admitted to Hospital
Smallpox 	—	—
Scarlet Fever 	17	5
Diphtheria 	—	—
Enteric Fever (incl. Paratyphoid) ...	—	—
Pneumonia 	10	2
Puerperal Pyrexia 	1	—
Acute Anterior Poliomyelitis ...	2	2
Acute Anterior Encephalitis ...	—	—
Meningococcal Infection 	2	2
Ophthalmia Neonatorum 	—	—
Erysipelas 	2	1
Whooping Cough 	31	1
Measles 	177	—
Sonné Dysentery 	4	1
Food Poisoning 	9	1
Observation 	—	—
Totals 	255	15

TUBERCULOSIS.

Record of Cases during the year 1953.

	Pulmonary		Non-Pulmonary	
	M	F	M	F
No. of cases on Register at beginning of year	39	32	10	3
No. of cases notified for first time during year	5	6	—	—
No. of cases restored to Register ...	—	—	—	—
No. of cases added to Register otherwise than by notification ...	—	—	—	—
No. removed to other districts ...	3	1	1	—
No. Recovered ...	1	2	—	—
No. died from the Disease ...	2	—	—	—
No. died from other causes ...	—	—	—	—
No. Removed from Register :—				
Revised diagnosis ...	—	—	—	—
No. of cases on Register at end of year ...	38	35	9	3

TUBERCULOSIS.

New Cases and Mortality during 1953.

Age Periods		New Cases				Deaths			
		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
		M	F	M	F	M	F	M	F
0—1 year	...	—	—	—	—	—	—	—	—
1—5 years	...	2	1	—	—	—	—	—	—
5—10 „	...	—	1	—	—	—	—	—	—
10—15 „	...	—	—	—	—	—	—	—	—
15—20 „	...	1	—	—	—	—	—	—	—
20—25 „	...	—	1	—	—	—	—	—	—
25—35 „	...	2	3	—	—	1	—	—	—
35—45 „	...	—	—	—	—	—	—	—	—
45—55 „	...	—	—	—	—	—	—	—	—
55—65 „	...	—	—	—	—	—	—	—	—
over 65 years	...	—	—	—	—	—	—	—	—
Age unknown	...	—	—	—	—	—	—	—	—
Totals	...	5	6	—	—	1	—	—	—

TUBERCULOSIS

(New Cases and Deaths) since 1934.

Year			New Cases		Deaths	
			Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
1934	...	...	13	7	4	—
1935	...	...	11	6	6	—
1936	...	...	9	1	7	2
1937	...	...	13	11	9	—
1938	...	...	18	17	12	5
1939	...	...	24	11	10	4
1940	...	...	19	3	11	1
1941	...	...	22	12	10	2
1942	...	...	23	4	11	4
1943	...	...	24	7	9	—
1944	...	...	21	10	12	2
1945	...	...	21	5	11	1
1946	...	...	28	9	7	3
1947	...	...	16	5	8	—
1948	...	...	22	3	11	2
1949	...	...	25	2	11	2
1950	...	...	27	3	5	2
1951	...	...	18	3	8	1
1952	...	...	10	—	2	—
1953	...	...	11	—	1	—

HOUSING.

I wish it were possible to record some improvement in this important section of environmental hygiene. Unfortunately, new construction still lags far behind need—indeed, owing to various factors which are well known to yourselves, the rate of new building is actually slowing down. The long-awaited Act concerning repairs and rents of houses has, at last been placed upon the Statute Book. At the present moment it does not seem likely that many landlords will avail themselves of the new facilities offered. A further difficulty which will have to be faced in the near future is the question of Slum Clearance. Local Authorities are now urged to submit plans for clearing slum areas within the next five years. Should they fail in completing this, it is likely that they will be asked to purchase the remaining property and place it in reasonable repair. I need not remind you that in Clearance Areas there is a legal onus on the Council to re-house the tenants thus displaced. There is no doubt at all that at the present rate of building, it is going to be a complete impossibility to clear all necessary unfit property in the Stanley area in the space of five years. Thus you are likely to be faced with a very considerable expense in purchasing unfit property and maintaining it in reasonable repair. This matter is one which must be tackled and on which a policy will have to be laid down in the immediate future. I hope to present you with the necessary facts and figures during the course of the next few months. What the solution is, it is not possible, at present to foresee. Certain it is that great courage and probably the abandonment of previously held convictions will be necessitated.

I should like to reiterate my remarks of last year regarding the unwisdom of re-housing tenants of the “problem” type in new Council houses. Further observation has convinced me that what I said was sound common sense. I can only urge that this factor will be borne in mind when new lettings become available.

Once again too, I should like to urge the provision of smaller housing units for the accommodation of the elderly. These are increasing in number and the occupation of a three-bedroomed house by a single individual is both an unnecessary hardship and very bad policy when so many people are in sore need of improved and larger accommodation. May I urge on you the need for serious consideration of this subject.

HOUSING STATISTICS, 1953.

Number of dwelling houses in the District	...	5,189.
Number of back-to-back houses included in above		367.

1. Inspection of Dwelling Houses during the year :—

1(a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	...	...	548
(b) Number of Inspections made for the purpose	...					962
2(a) Number of dwelling houses (included under sub-head 1 above), which were inspected and recorded under the Housing Consolidated Regulations	...	...	...	...	...	308
(b) Number of Inspections made for the purpose	...					376
3. Number of dwelling-houses needing further action :—						
(a) Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	...	308
(b) Number(excluding those in sub-head 3(a)above) found not to be in all respects reasonably fit for human habitation	...	...	...	...	...	Nil

2. Remedy of Defects during the Year without Service of Formal Notices.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	178
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3. Action under Statutory Powers during the Year.

A. Proceedings under Sections 9, 10 and 16, Housing Act, 1936 :—

(1) Number of dwelling-houses in respect of which notices were served requiring repairs					3
(2) Number of dwelling-houses which were rendered fit after service of formal notices :					
(a) By owners	...	...	...	...	3
(b) By Local Authority	...	...			Nil

B. Proceedings under Public Health Acts :—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	7
--	-----	-----	-----	---

(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—

(a) By owners	...	...	...	...	4
(b) By Local Authority in default of owners	...	...	...	...	3

C. Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—

1. Number of representations etc. made in respect of dwelling-houses unfit for habitation	...	...	...	...	12
2. Number of dwelling-houses in respect of which Demolition Orders were made	...	...	...	...	12
3. Number of dwelling-houses demolished in pursuance of Demolition Orders	...	...	...	...	1

D. Proceedings under Section 12 of the Housing Act, 1936 :—

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	...	...	...	...	Nil
(2) Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or room having been rendered fit	...	...	...	...	Nil

4. Housing Act, 1936—Part IV—Overcrowding.

(a) (1) Number of dwellings overcrowded at the end of the year	...	...	...	...	106
(2) Number of families dwelling therein	...	...	...	...	106
(3) Number of persons dwelling therein	...	...	...	...	413
(b) Number of new cases of overcrowding reported during the year	...	...	...	...	Nil
(c) (1) Number of cases of overcrowding relieved during the year	...	...	...	...	10
(2) Number of persons concerned in such cases	...	...	...	...	47

New Houses.

5. Number of new houses provided during the year :—

By the Local Authority :—

Permanent type	...	...	...	...	34
Temporary type	...	...	...	...	Nil.

By Private Enterprise 13

6. Housing Act, 1949.

Any action in connection with Section 20, "Grants to persons other than local authorities for improvement of housing accommodation"	Nil
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SANITARY CIRCUMSTANCES OF THE AREA.

There has been no change in the arrangements for the supply of water since my last Report. The total consumption in the district was 199,264,000 gallons. Of this, 30,791,000 gallons were used for trade purposes, and the balance of 168,473,000 gallons was accounted for by domestic purposes and leakage respectively.

The average daily consumption per head for domestic purposes was 27·45 gallons and for trade purposes 5·18 gallons. The increase in the domestic consumption is no doubt due to the increasing number of houses with bathrooms.

There are no wells and no stand pipes in use in the district. The water is without plumbo-solvent action and is obtained by arrangement with Wakefield Corporation.

One sample was taken during the year and below is the chemical analysis of this sample.

	Parts per million.		
Total Solids	115
Mineral Matter	85
Chlorides as NaCl	19
Free Ammonia	0·6
Albuminoid Ammonia	0·052
Oxygen absorbed in 4 hrs. at 80° F.	0·17
Nitrous Nitrogen	—
Nitric Nitrogen	0·35
Temporary Hardness	15
Total Hardness	56
Lead in solution	Nil
Lead dissolved in 24 hours	Nil
pH. Value	7·2
Residual Chlorine—actual free			0·02
Total including chlormines	0·05

Sewage Works.—It has not yet been found possible to undertake the improvements mentioned as being necessary. The matter is very much in mind and as soon as possible the two new filters will be completed. Meanwhile, though moderately satisfactory, the Works cannot be considered by any means ideal.

Drains and Sewers.—No major scheme of alteration has been undertaken during the year, and no damage due to subsidence has been reported.

Closet Accommodation.—10 privies were converted to W.C.'s during the year and the following table shows the continued improvement in comparison with 1926.

<i>Year</i>	<i>No. of Privies</i>	<i>No. of W.C.'s</i>	<i>No. of Waste W.C.'s</i>
1926	1,092	1,387	12
1953	78	4,889	12

Public Cleansing.—The cleansing of the District is done by direct labour and the Service has been adequately maintained. The mechanical gully emptier is employed for the emptying of cesspools and this is done without nuisance. There are 15 cesspools in the district and these are emptied monthly.

Rivers and Streams.—No action necessary during the year.

Shops and Offices.—No complaint was received and no action has been necessary during the year in respect of any premises.

Camping Sites.—There are no official camping sites in the area.

Swimming Baths and Pools.—No public baths in this area.

Bed Bug Disinfestation.—Gammexane and D.D.T. are used with excellent results and routine disinfestation is carried out where necessary in relation to all new Council house tenants. 10 houses were reported as being verminous. All were sprayed with D.D.T. Liquid. 8 cases of beetle infestation were dealt with, again by the use of Vermicine and Gammexane dust.

Smoke Abatement.—The long awaited electrification of Lofthouse Colliery is still outstanding. Meanwhile, very considerable smoke nuisance arises, and although all our approaches are courteously met, it does not seem possible to obtain any substantial amelioration.

The Miners' Hostel still gives rise to a nuisance from time to time, but here I think there has been some improvement and certainly every effort is being made on the part of the responsible authorities to meet our wishes in this matter.

Colliery Spoil Heaps.—Sprays are kept in action and no serious nuisance has been reported during the year.

Offensive Trades.—There is one Knacker's Yard in the district and this is kept under proper supervision. Very many alterations have been made during the year and there is now a marked improvement. The Farm Stores has a small gut scraping room but this is visited at very regular intervals by the Sanitary Inspectors in the course of their routine meat inspections. No offence has arisen during the year and the proprietors are very co-operative.

41 visits have been paid to 26 Fried Fish Shops in the area and it is good to report that the high standards previously reported have been kept up without diminution. The owners are very willing to conform to any suggestion that may be made.

Factories and Workshops.—Parts 1 and 8 of the Act fall within the scope of administration of this Authority. Appended is a list of Outworkers and it will be noted that no special action has been necessary throughout the year. Routine inspections have been carried out in respect of Part 1 of the Act, and again no special action has been necessary.

Inspection for purposes of provisions as to health.

(including inspections made by Sanitary Inspector).

Premises	No. on Register	Number of:—		
		Inspections	Written Notices	Occupiers prosecuted
1. Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	22	24	—	—
2. Factories not included in (1) in which Section 7 is enforced by the Local Authority	31	78	—	—
3. Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) ..	—	—	—	—
TOTAL	53	102	—	—

CASES IN WHICH DEFECTS WERE FOUND (If defects are discovered on two, three or more separate occasions, they should be reckoned as two, three or more cases).

				No. of cases in which defects were found			Number of cases in which Prosecutions were instituted	
				Found	Remedied	Referred :		
						to H.M. Inspector		by H.M. Inspector
Want of cleanliness	--	--	--	--	--	
Overcrowding	--	--	--	--	--	
Unreasonable temperature	--	--	--	--	--	
Inadequate ventilation	--	--	--	--	--	
Ineffective drainage of floors		..	--	--	--	--	--	
Sanitary Conveniences :—								
Insufficient	—	—	—	—	—	
Not separate for sexes	—	—	—	—	—	
Unsuitable or defective	—	—	—	—	—	
Other offences against the Act (not including offences relating to Outwork)	--	--	--	--	--	
Total	—	—	—	—	—	

OUTWORK.

Nature of Work	No. of Out-workers in August list required by Sec. 110 (1)	Section 110			Section 111	
		No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-wholesome premises	Notices Served	Prosecutions
WEARING APPAREL :—						
Making, etc. ..	—	—	—	—	—	—
Cleaning and washing	—	—	—	—	—	—
Textile Weaving ..	—	—	—	—	—	—
TOTAL ..	—	—	—	—	—	—

SANITARY INSPECTION OF AREA.

Infectious Disease Prevention.

Inspections	...	...	...	...	18
Further Enquiries	...	...	...	...	—
Disinfections	...	...	...	...	6
Schools Disinfected	...	...	...	...	—
Miscellaneous Visits	...	...	...	...	2
Scabies Visits	...	...	...	...	—

Milk and Dairies.

Inspections of Cowsheds and Dairies	...	...	...	...	—
Milk Samples taken	...	...	...	...	40

Food and Drugs Inspections.

Meat Inspections	...	...	...	...	426
Bakehouses	...	...	...	...	93
Food Inspections...	...	...	...	...	242
Ice Cream Sampling	...	...	...	...	—
Water Sampling...	...	...	...	...	1
Fish Shop Inspection	...	...	...	...	41

Housing.

Houses inspected and recorded	...	...	...	...	308
General Surveys	...	...	...	...	68
Public Health Act Inspections	...	...	...	...	240
Re-visits	...	...	...	...	346

Offensive Trades.

Inspections of Knackers' Yards	...	...	...	...	14
Inspections of Blood Boiling premises	...	...	...	...	—
Inspections of Fat Refining Premises	...	...	...	...	—

Sanitary Matters.

Inspections of Verminous Premises	...	...	...	...	14
Inspections for Rat and Mouse infestations	...	...	...	...	89
Inspections of new drains	...	...	...	...	10
Smoke Observations	...	...	...	...	58
Inspections re Refuse Removal and Disposal	...	...	...	...	434
Factories and Workshops	...	...	...	...	102
Tents, Vans and Sheds	...	...	...	...	126
Number of Statutory Notices (Housing Act and Public Health Acts)	...	...	...	...	21
Number of Statutory Notices (Sect. 17 of the Housing Act, 1936)	...	...	...	...	—
Number of Nuisances abated on serving Statutory Notice (Public Health Acts)	...	...	...	...	7
Inspections for Nuisances	...	...	...	...	518
Council House Inspections	...	...	...	...	93
Inspection of Repairs	...	...	...	...	185
Visits re Council House applications	...	...	...	...	341
Miscellaneous	...	...	...	...	227

Stanley Urban District Council.

ANNUAL REPORT

OF THE

Sanitary Inspector and Cleansing Superintendent

(D. WALKER, A.R.S.I., M.S.I.A.)

For the Year 1953.

To the Chairman and Members of the Stanley Urban District Council,

GENTLEMEN,

I beg to submit this, my Fourth Annual Report, upon the work done by your Health Department during the year.

Many of the records of inspections and statistical data are to be found in the earlier part of the report. Further increased costs of labour and materials have again retarded repair work to much of the cottage property in the area and it has become increasingly difficult to get major repairs carried out to this type of property and for even minor repairs it has often been necessary to serve statutory notices. Houses available for letting in the area appear to have been limited to those built by the Council, as practically all privately owned houses which become vacant are sold whatever their condition, and whilst they are being repaired and to some extent temporarily benefiting the housing position in the area I can see that some of the owners may be badly hit when slum clearance work is recommenced. Applications for improvement grants have not been made in numbers expected but I think that there seems to be still too many people who know nothing or very little of this scheme although it has been given a great deal of publicity.

Only 34 houses were completed by the Council during the year and the application list shows 611 applicants desiring houses.

Damage to buildings by mining subsidence appears to have now almost finished and the National Coal Board have almost completed repairs necessary to houses affected in the Bottomboat and Lofthouse Gate areas. Very good relations have been maintained between the department and the N.C.B. officials concerned who give complaints of subsidence speedy attention.

The meat inspection table shows the considerable attention which has been paid to this particular subject.

I should like to express my appreciation to the Chairman and to the other members of the Council for the encouragement and consideration they have given me during the past twelve months.

Abatement of Nuisances.

Number of Privies converted into W.C.'s	...	10
Do. W.C.'s provided	...	10
Do. Choked drains and W.C.'s cleared	...	203
Do. Choked sewers cleared	...	—
Do. Sink wastes repaired	...	9
Do. Defective drains relaid	...	4
Do. New drains laid...	...	4
Do. Gully traps fixed	...	—
Do. Water closets repaired	...	27
Do. Inspection chambers repaired	...	—
Do. Eaves gutters/down spouts repaired	...	62
Do. House roofs and damp walls repaired	...	80
Do. Flooded cellars	...	—
Do. Damp houses remedied	...	80
Do. Damp proof courses fixed	...	—
Do. House floors repaired	...	18
Do. Walls replastered	...	83
Do. New sinks fixed	...	18
Do. Windows re-corded and repaired	...	45
Do. Fireplaces repaired	...	34
Do. Washing coppers repaired	...	3
Do. Defective dustbins removed	...	238
Do. Privy middens abolished	...	10
Do. Ashpits abolished	...	10
Do. Dustbins provided in lieu of ashpits	...	10
Do. Verminous premises	...	14
Do. Dirty premises	...	—

Number of Beetle infested premises ...	...	8
Do. Rat infested premises ...	...	89
Do. Burst services ...	...	27
Do. Ashpits repaired ...	...	—
Do. W.C. Soil pipes repaired ...	...	27
Do. Ceilings repaired ...	...	—
Do. Doors repaired/renewed ...	...	24
Do. Bath wastes repaired ...	...	—
Do. Miscellaneous cleansing ...	...	—
Do. Cooking ranges repaired ...	...	34
Do. Defective chimneys ...	...	—
Do. Insanitary yards ...	...	6
Do. Accumulations of refuse ...	...	2
Do. Dangerous buildings ...	...	11
Do. Insufficient W.C. accommodation ...	...	—
Do. Dangerous walls ...	...	—

Meat Inspection.

Slaughtering at the Farm Stores Bacon Factory has continued and the rate of killing has again been stepped up. 19,074 pigs have been killed during the year and whilst most of the carcasses have gone for bacon there has been a tendency for more to be directed to the butchers' shops. All offal, heads, etc., are despatched to shops outside the area and, as stated previously, sooner or later it will be advisable to get meat marking approved and commenced. This is becoming more important in view of the fact that some Local Authorities now enforce bye-laws requiring that meat not marked and brought into their area must be brought to their abattoir for inspection.

The factory has maintained its high standard of efficiency during the year and has left little to be desired from the Public Health point of view. The management are most helpful and are only too glad to co-operate in bringing about improvements suggested at various times by the Health Department.

Regular inspections have been made of the Meat Allocation Depot of the Stanley area which is situated at Lofthouse Gate. Whilst every effort is made to keep the meat as clean and wholesome as possible the system leaves a lot to be desired. Transport of meat to and from the depot is by closed lorries but no facilities are provided for hanging the carcasses which have to be piled in the lorries on top of each other leading to deterioration in the condition of the meat.

From the table shown it will be seen that the percentage of whole carcasses condemned for tuberculosis was much less than last year, i.e., 0·19 % as compared with 0·25 % and the percentage of carcasses which had some part condemned for tuberculosis showed a decrease from 4·3 % to 2·4 %.

Pigs slaughtered for home consumption were inspected upon request and the owners advised accordingly.

All meat condemned during the year was surrendered and no prosecutions or seizures were necessary.

1953.	Visits 424.	Pigs Inspected 19,074.
35 whole pigs' carcasses & organs ...	4791 lbs.	Generalised Tuberculosis
1 whole pig's carcass & organs ...	85 lbs.	Tuberculosis with emaciation
1 " " " " " ...	176 lbs.	Septic Metritis
1 " " " " " ...	141 lbs.	Septic Pneumonia and Pleurisy
1 " " " " " ...	69 lbs.	Jaundice
1 " " " " " ...	77 lbs.	Rickets with malnutrition
5 whole pigs' carcasses & organs ...	621 lbs.	Fevered
2 " " " " " ...	289 lbs.	Moribund
4 " " " " " ...	549 lbs.	Oedema
3 " " " " " ...	416 lbs.	Suffocation
Pork	70 lbs.	Damaged and bruised
Pork	35 lbs.	Tuberculosis
Pork	12 lbs.	Sour
Pork	7 lbs.	Local Oedema
Pork	13 lbs.	Damaged with Abscesses
Pork	17 lbs.	Melanosis
Pork	60 lbs.	Peritonitis and Oedema
Pork	20 lbs.	Abscess
6 Forequarters	212 lbs.	Tuberculosis
6 Sets of intestines	—	Tuberculosis
1 Set of intestines	—	Abscesses
1 " " " " "	—	Peritonitis
Pigs' heads	480	Tuberculosis
Pigs' livers	56	Necrosis
" " " " "	34	Cirrhosis
" " " " "	2	Cysts (Echinococcus)
Pig's livers	1	Abscess
Pigs' lungs (sets of)	1	Tuberculosis
" " " " "	1963	Pneumonia
" " " " "	995	Pleurisy

Pigs' plucks	...	...	185	Tuberculosis
" "	...	...	125	Pleurisy, Peritonitis and Pericarditis
" "	...	...	6	Abscesses
Pigs' mesenteric fats	...	...	191	Tuberculosis
Pigs' hearts	...	...	269	Pericarditis
Pigs' kidneys	...	...	91	Cystic
" "	...	...	9	Nephritis
" "	...	...	2	Tuberculosis
Pigs' stomachs	...	...	20	Tuberculosis
" "	...	...	3	Peritonitis
Pigs' kidneys and flairs	...	...	14	Peritonitis
" "	...	...	1	Abscesses
" "	...	...	4	Tuberculosis
Pigs' leaf fats	...	...	3	Tuberculosis
" "	...	...	1	Peritonitis
Pigs' spleens	...	...	17	Tuberculosis
" "	...	...	1	Peritonitis
Pig's udder	...	...	6 lbs.	Mastitis
4 pigs to skin for urticaria	...	...	68 lbs.	

Carcases Inspected and Condemned.

	Cattle excluding cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known) ..	—	—	—	—	19074
Number Inspected ..	—	—	—	—	19074
<i>All Diseases except Tuberculosis :—</i>					
Whole carcasses condemned	—	—	—	—	18
Carcasses of which some part or organ was condemned	—	—	—	—	3561
Percentage of the number inspected affected with disease other than tuber- culosis ..	—	—	—	—	18.2
<i>Tuberculosis Only :—</i>					
Whole carcasses condemned	—	—	—	—	36
Carcasses of which some part or organ was condemned	—	—	—	—	520
Percentage of the number inspected affected with tuberculosis ..	—	—	—	—	2.4

Milk and other Foods.

40 official samples of milk were purchased from retailers in the district and submitted to the Public Analyst for analysis.

2 of the samples were found to be deficient in milk solids other than fat but in each case the freezing point test showed them to be genuine milk. A third sample was found to contain 3 % extraneous water and a fourth one 5.3 % abstraction of fat. In the case of the third sample an appeal to cow sample was taken and as a result no further legal action was deemed to be necessary.

No prosecutions have been necessary for milk adulteration during the year but two cautions have been issued by the West Riding County Council in respect of samples which have fallen short of the Statutory standard laid down for milk.

It is pleasing to note that delivery of milk from the open churns and milk kit has been greatly reduced during the year and of the 20 registered retailers only two still retain this method of delivery.

Almost all milk sold in the district is of the Special designated types, the greater portion being pasteurised and is brought in by local retailers from Leeds, Castleford, Bradford and Wakefield dairy plants.

There is a good demand in the district for sterilized milk which is sold chiefly by the small grocers shops in sealed bottles.

376 visits have been made for the purpose of inspecting food shops and it was found necessary to condemn the following articles of food :—

1 Ewe carcase	...	46 lbs.	Badly mould grown
Pressed beef	...	6 $\frac{3}{4}$ lbs.	Decomposition
Brisket beef	...	11 lbs.	Decomposition
N.Z. beef	...	70 lbs.	Bone taint
Irish rolls	...	168 lbs.	Sour
Ox tongue	...	6 lbs.	Burst tin
Cooked boneless ham	...	40 lbs. 10 ozs.	Decomposition
Pork luncheon meat	...	7 ozs.	Blown
Lunch tongue	...	12 lbs. 6 ozs.	Decomposition
Lamb's tongues	...	12 ozs.	Decomposition
Stewed steak	...	15 $\frac{1}{2}$ ozs.	Blown
Steak and vegetable	...	1 lb.	Blown
Pears	...	3 lbs. 7 ozs.	Blown
Peas	...	11 ozs.	Blown
Fruit salad	...	15 $\frac{1}{2}$ ozs.	Blown
Pineapple	...	13 ozs.	Mouldy and sour
Evaporated milk	...	2 pints	Decomposition
Sultanas	...	61 $\frac{1}{2}$ lbs.	Mice contamination

As the results of complaints, samples of Piccalilli and Baking Powder were submitted to the Public Analyst and the results showed that the Baking Powder contained excess of sodium bicarbonate to the extent of 8.8 %.

The Piccalilli showed the presence of a form of jute strands. In both cases it was not possible to take legal action due to the circumstances under which the samples were obtained but the facts were forwarded to the firms concerned with a view of trying to avoid repetitions of the cases.

During the year the bye-laws relating to the handling, wrapping and delivery of food have been enforced where necessary. The use of newsprint as wrapping in some food shops still continues and is to be deprecated. During the year considerable spoilage of bacon and ham due to fly blowing and warm weather has been noted and it is felt that refrigerator provision at all shops selling goods of this type is both a good public health and economic proposition.

Bakehouses.

93 inspections of bakehouses in the district were carried out and a number of defects were noted. Generally these were made good on verbal intimation to the owner and in no case was it necessary for any legal action to be taken. There are 8 bakehouses in the district and all are in good condition.

Provision of clean towels provides the main source of trouble in the bakehouses and efforts to get owners to instal hand driers in place of towels has met with little success.

Ice Cream.

There are no ice cream manufacturers in the area and all ice cream sold by the shops is prepacked and of well-known proprietary brands.

Lollipops are sold in large quantities by many of the shops registered for the sale of ice cream.

37 shops are registered for the sale of Ice Cream under the Food & Drugs Act, 1938.

Sale of ice cream from vans has fallen off and appears to be now limited to two or three local firms which run vans of reasonable construction.

Offensive Trades.

No offensive trade is carried on in the district. Fat melting and extracting is carried on on a small scale at the Bacon Factory and at a local Kitchen Waste processing plant but hardly on such a scale as to class as a trade.

The Knacker's Yard at Kirkhamgate is in good structural condition and the owners keep the place in a satisfactorily clean condition. Under the West Riding County Council (General Powers) Act, 1951, notice is given by the owner of any animal slaughtered at the yard. Most of the animals now taken to this yard are animals which have died at local farms. 14 visits were made to the yard during the year.

Fish and Chip Shops.

Although no longer an offensive trade these shops were visited regularly. During the year 41 visits were made and it can be said that generally speaking there is a good class of shop in this area. There are 26 registered under the Food and Drugs Act, 1938.

Factories and Workshops.

102 visits were made to factories and workshops of the district and generally speaking the premises were found to be satisfactory. No notice was received from H.M. Inspector of Factories in respect of any default found by his department.

The number of premises on the register at the end of the year was 31 with mechanical power, and 22 without mechanical power.

Smoke Abatement.

Smoke from industrial chimneys in the district is limited to that from two colliery chimneys, three brickwork chimneys and a small number of small factory chimneys. As in previous years the main sources of complaint are the two colliery chimneys which pour out black smoke for periods well in excess of the permitted times. Constant touch is maintained with the colliery officials and whilst the installation of a trial mechanical stoker at Lofthouse Colliery has not been a success it is hoped that electrification of the pit will be speeded up.

All new Council houses have at least one of the fireplaces installed in them of an approved type for use of smokeless fuel. I am afraid that in an area of this type however, unless there is a large scale education in the use of smokeless fuel or compulsion for its use, bituminous coal will continue to be the fuel used in almost all domestic buildings in the area, with consequent production of smoke.

The Miners' Hostel chimney at Stanley continues to give rise to complaints from tenants in the neighbouring residential area. Low grade fuel is used in these boilers and the chimney is much too low having regard to the neighbouring buildings.

During the year 58 observations have been taken of various chimneys and 6 gave readings of smoke emission for periods exceeding three minutes in thirty.

Colliery Tips.

Three tips in the area show signs of active fire. One is at Lofthouse Colliery and two at Parkhill Colliery. The large Parkhill and Lofthouse tips have been abandoned and have tended to burn themselves out, and the smaller one at Lofthouse is kept well under control by water sprays. Nearby houses make it necessary to keep the tip under constant observation as any easing of the sprays leads to immediate complaints, by the tenants, of the fumes from this tip.

The new tip for Lofthouse Colliery which is in the Rothwell U.D. area is burning and fumes from it have already given rise to complaints by tenants living nearby in Stanley area. This tip is a very large one and has proved to be a nuisance to Stanley U.D. residents unless a proper water-spraying system is maintained by the N.C.B.

Housing.

A considerable amount of time has been paid to general housing inspection and all complaints from tenants have received early attention. There has been a good amount of repair work obtained to houses but it is becoming increasingly difficult to get even the more essential repairs done to the older type of cottage property, which is in many cases, obviously fit only for condemnation.

It has been suggested in many quarters that the solution to the repair question is the increasing of house rents. This, in my opinion, would not solve the problem as immediately this was allowed the department would be inundated with complaints from the tenants of the many sub-standard houses and even if the many repairs were pressed for I do not think that the present building staff in the area would be able to cope with more than a few of the extra complaints if the normal building programme was to be continued at the same time.

The West Riding County Council (General Powers) Act has provided more expeditious methods to deal with certain types of urgent defects than were available under the Public Health Act, 1936 and has proved to be a great help in enforcing the carrying out of urgent repairs.

12 houses have been dealt with under Section 11 of the Housing Act, 1936, but this is only touching on the fringe of the problem.

34 council houses were completed during the year. 10 of these were let to overcrowded families, 4 to tenants of condemned houses. 3 to special cases and 17 to persons in lodgings. Even with the many old unfit houses still being used there is a shortage of housing accommodation in the district as shown by the Council house application list which shows some 165 applicants who are in lodgings and have never had a proper home of their own.

It is regretted that interviews with many of the Council house tenancy applicants have revealed that the high rents of new houses are causing many families of the lower income groups to either withdraw their applications or to ask for a relet of a pre-war house.

Small use is being made by owners of the improvement schemes which have been made available by the Housing Act, 1949, but it is possible that in years to come when the Housing standard of older property is raised there will a good many owners and occupiers desirous of taking advantage of this Act.

Overcrowding.

Figures of families overcrowded are not actually available but houses known to be housing more than the legally permitted number of persons at the end of the year numbered 16.

For re-housing purposes it is good to see that the Council has adopted as a standard for overcrowding a similar standard to that upon which they should re-house tenants into Council houses and is laid down in the Housing Act, 1936, Section 136. The standard which is not so high as that laid down in Section 58 of the Housing Act, 1936, showed that 101 applicants for Council houses not including persons living in lodgings were living in conditions considered to constitute overcrowding.

During the year 10 cases of such overcrowding were relieved by the allocation of Council houses.

Privy Conversions.

Gradual replacement of privies in the area has continued during the year and a further 10 have been converted to W.C.'s during this time.

The programme of conversions is now almost completed as the majority of remaining privies either serve property fit only for condemnation, or have not a sufficient water supply or sewer available.

In addition to conveniences in use as shown in the table there are 14 pail closets.

No. and Type of Closet			No. and Type of Ashpits				Cess- pools emptied by Sanitary Staff
Privies to convert in all parts of the District	Water Carriage System		Total No. of Ashpits of all kinds	Privy Ashpits	Dry Ashpits	Bins	
	Fresh Water	Waste Water or Hand Flushed					
78	4,889	12	5,017	36	12	4,969	16

Cesspools.

The 16 cesspools and all the road gullies in the district are cleansed regularly by means of the Council's own 750 gallon mechanical gully and cesspool emptier. The work is carried out satisfactorily and hygienically and by loaning out the machine to the West Riding County Council, Horbury U.D.C., and Ossett M.B.C., the service is provided very economically.

Sewers in various parts of the district are flushed regularly with this machine. The flushing is necessary due to varying degrees of back fall in these sewers caused by mining subsidence. It is obvious that sooner or later relaying of these sections will become a necessity as they do at times lead to considerable nuisance to properties draining into them.

Water Supply.

All occupied premises in the district are on town's water which is bought from Wakefield Corporation. Certain parts in Ferry Lane and Brandy Carr suffer from low pressure and consequent poor supply at various parts of the day. Agreement has been reached with Normanton U.D.C. for the connection of mains in Ferry Lane to their main. This has improved the supply of water available at the lower portion of this road and any trouble now experienced is due to the old service pipes which appear to have become partially obstructed to some of the properties. The age of the property in this part of the district makes costly extensions not worth while.

Tents and Caravans.

There are five licensed caravans in the district. One of the public houses utilises a field at the rear as a site for travelling salesmen at various times of the year. The use of this site is limited to four families at any time and proper

water supply and sanitary accommodation are provided and maintained. The site is not licensed and has been used in this way for a number of years. Several caravans which were used as dwellings by people on their own land have become unoccupied during the year and this method of providing living accommodation appears to be losing popularity.

Disinfection.

The Disinfection of infected premises is done by means of formalin lamps and spray.

Number of Disinfections ... 3

Verminous Premises.

Liquid insecticide has been the only material used at premises infested with bugs, fleas, etc., and has given very good results. There appears to be a reduction in the number of verminous houses and this I think is in no small measure due to the fact that less low quality second hand furniture is being bought by people who years ago could not afford the type of furniture they now buy.

Prior to removal to Council houses all tenant's old houses are inspected and spraying carried out only if necessary.

Gammexane dust has been used with success against cockroaches. Periodic spraying of the tips infested by crickets has again been necessary.

The Council's part-time rodent operator has not been replaced and the work he normally did has been carried out by other members of the staff. There are no places in the district which show major infestation but the sewage works and refuse tips are poison baited regularly.

Urinals.

The two public urinals in the district have been regularly cleansed but regret to say that they are often subjected to abuse by members of the public. Both require lighting and before very long it will be necessary to carry out major repairs to one of them. No new ones have been constructed during the year but the problem will have to be faced as more and more public houses place the ones provided for the public houses inside the main buildings.

Cleansing and Salvage.

This service is carried out by direct labour and during the year all bins and privies were emptied regularly at intervals of 7 — 8 days which was most satisfactory.

The 18-20 cu. yd. Shelvoke & Drewry fore and aft tipping freighter was delivered during June and since then has taken the place of the two Karrier Bantams. This has meant reorganization of the collection system and generally speaking this has proved to be most successful and more economical than the previous employment of small vehicles. The vehicle is powered by a diesel engine and appears to be quite satisfactory for refuse collection work.

The vehicles employed in the department are the freighter and one Karrier Bantam on full time refuse collection and a second Karrier Bantam on part time salvage work and part time refuse collection.

Salvage has again shown itself to be an essential and important part of the department from the economical point of view. Price of paper fell to £6 10s. 0d. per ton during the year but if a power baling press was obtained to overcome baling difficulties and high cost then the paper salvage would prove itself more attractive.

During the year the collection of kitchen waste was discontinued and all bins brought in. The collection of this commodity is well covered by private collectors and small pig keepers, and the loss sustained by the Council no longer exists.

£688 was realized by the sale of salvaged materials made up as follows :—Paper £478. Metal and Rags £159. Kitchen Waste £51.

The Bonus scheme on waste paper and rags salvage adopted by the Council some years ago has continued and in spite of the lowered price of paper £74 has been paid out as bonus to the workmen.

There has been no difficulty over staffing of the cleansing department during the year and the winter was more than good from the point of view of cleansing. Complaints have been few and often when made not justified and I think that the service is quite satisfactory and economical.

The bin provision scheme has completed its second full year and during this time 238 new bins have been provided. The prices of dustbins appear to be falling and during the year it is intended to continue to provide $2\frac{1}{2}$ cu. ft. bins to properties where it is known that they are large enough instead of the usual $3\frac{1}{4}$ cu. ft. bins generally supplied. This results in considerable saving which allows more bins to be supplied. Galvanised dustbins have been available in restricted quantities this year but it is hoped they will again be readily available at an early date.

There are tips in the district at Bottomboat, Limepit Lane, Lee Moor and Jerry Clay Lane. Land is being reclaimed at Bottomboat and Limepit Lane. Lee Moor is a dump for eventual disposal on agricultural land and Jerry Clay Lane is a controlled tip. All these tips are in satisfactory condition and there appears to be adequate alternative tipping space available in the district for many years to come.

Petroleum Spirit Stores.

There are 18 premises registered with the Council for the storage of petrol in quantities ranging from 100 galls. to 4,000 galls.

Regular visits are made to the premises to see that the regulations and safety precautions are being carried out.

Miscellaneous Table.

Letters sent out—General	...	...	2990
Informal notices—Housing	...	...	690
Legal notices—Abatement of Nuisances	...	...	21

I remain, Gentlemen,

Your obedient servant,

D. WALKER.

